Corrigendum

Plasma diamine oxidase activity in asthmatic children by Kyoichiro Toyoshima, Ikuo Imamura, Satoru Doi, Toshishige Inoue, Isamu Takamatsu, Norihide Murayama, Makoto Kameda, Michiaki Hayashida and Hiroyuki Fukui.

Allergology International 1996; **45**: 141–143

The publisher wishes to draw readers' attention to an error in the Results section. The correct Results are printed below.

RESULTS

Plasma DAO activity during acute asthmatic attacks was slightly higher in severe attacks (0.57 ± 0.20 pmol/min/mL) than in mild ones (0.38 ± 0.18 pmol/min/mL), but this difference was not significant ($P<0.10$; Fig. 2). Figure 3 shows DAO activity at the remission phase in 16 asthmatic patients. Six patients had mild asthma and 10 patients had moderate or severe asthma. Diamine oxidase activity was clearly higher in moderately or severely asthmatic children (0.41 ± 0.16pmol/min/mL) than in those having mild cases (0.15 ± 0.05 pmol/min/mL; $P<0.01$). %FEV_1 and FEV_1% was found to be 101.8 ± 13.9 and 86.8 ± 5.7% in mild asthmatics, and 96.4 ± 17.8 and 76.9 ± 8.9% in moderate and severe asthmatics, respectively. The time-course of DAO activity from the attack phase through to recovery is shown in Fig. 4. Diamine oxidase activity decreased gradually from the time of the acute attacks to the seventh day of convalescence. A statistically significant difference ($P<0.01$) in DAO activity was found to exist between the acute attacks and the seventh day. Measurements of DAO activity were found to be 0.56 ± 17 pmol/min/mL during acute attacks, and 0.51 ± 0.33 and 0.38 ± 0.22 pmol/min/mL on the first and seventh day of convalescence, respectively.

The publisher apologizes sincerely for this error.